

## Department of Public Works and Engineering Public Utilities Division Planning and Operations Support Branch

## **Affidavit of Understanding**

I,	, as fee simple owner of the property
(print name) described below, certify that I understand there will be no refund of Impact Fees paid for this	
project for any reason; including, but not limited to, discovery of prior payment or valid WCR	
letters, discovery of prior existing development for which credit was not given, cancellation of a	
project for any reason, and inability to build due to deed restrictions, funding, etc.	
I understand that I am paying these fees in water/wastewater approval of my building permit, a	
Capacity Reservation Application for this development, if I so choose.	
By my signature below, I acknowledge agreement w	rith the conditions and terms outlined above.
Signature (Property owner in fee)	Date
Print Name	
<u>Legal Description of property:</u>	
Project Number:	